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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION of the Page 1/2006 of the Page 2 of the Page 2

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This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Committee, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 **CLAIMS AS FILED - PART I SMALL ENTITY** OTHER THAN (Column 2) TYPE [SMALL ENTITY (Column 1) OR **TOTAL CLAIMS** FEE FEE RATE RATE BASIC FEE BASIC FEE 370.00 740.00 **FOR** NUMBER FILED NUMBER EXTRA OR TOTAL CHARGEABLE CLAIMS minus 20= X\$ 9= X\$18= INDEPENDENT CLAIMS minus 3 = X84= X42= OR MULTIPLE DEPENDENT CLAIM PRESENT +280= +140= OR * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL TOTAL OR **CLAIMS AS AMENDED - PART II** OTHER THAN **SMALL ENTITY SMALL ENTITY** OR (Column 1) (Column 2) (Column 3) HIGHEST CLAIMS ADDI-ADDI-NUMBER REMAINING PRESENT TIONAL RATE TIONAL RATE PREVIOUSLY **AFTER EXTRA** ENDMENT FEE FEE **AMENDMENT** PAID FOR X\$18=Minus X\$ 9= Total OR Independent Minus X84= X42= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +280= +140= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) HIGHEST CLAIMS ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL TIONAL RATE RATE PREVIOUSLY AFTER **EXTRA** ENDMENT FEE **AMENDMENT** PAID FOR FEE 20Total Minus X\$9=X\$18=OR Minus Independent X42 =X84 =84 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +280= +140= TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 3) (Column 1) (Column 2) HIGHEST **CLAIMS** ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL RATE TIONAL **PREVIOUSLY** AMENDMENT AFTER **EXTRA AMENDMENT** PAID FOR **FEE** FEE Total Minus X\$ 9= X\$18= OR Independent-Minus X42 =X84= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +280= +140= OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL OR ADDIT. FEE ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Application or Docket Number